

CLAIMS ONLY

Application Number

10/696, 529

Filing Date

Applicant(s)

5-9-05

6-15-05

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	2		4		4	
Total Depend	16		12		12	
Total Claims	18		16		16	